



<u>Letter in</u> <u>figure</u>	Semen concentration at diagnosis	Recovery or decreased sperm concentration after 2 years?	Number of patients	Assigned treatment level and consolidation treatment scheme
Α	Normospermia	Remained normospermic	11/14 (79%)	n=3 TL1 n=2 TL2-COPDAC-28 n=2 TL2-DECOPDAC-21 n=3 TL3-COPDAC-28 n=1 TL3-DECOPDAC-21
В		Decreased sperm concentration	3/14 (21%)	n=1 TL3-COPDAC-28 n=1 TL3-COPDAC-28 + pelvic RT n=1 TL3-DECOPDAC-21
С	Oligo/azoospermia	Full recovery	2/14 (14%)	n=1 TL2-DECOPDAC-21 n=1 TL3-COPDAC-28 + pelvic RT
D		Partial recovery	2/14 (14%)	n=1 TL2-DECOPDAC-21 n=1 TL3-COPDAC-28
E		No recovery	8/14 (57%)	n=1 TL2-COPDAC-28 n=1 TL2-DECOPDAC-21 n=2 TL3-COPDAC-28 n=4 TL3-DECOPDAC-21
F		Decreased sperm concentration	2/14 (14%)	n=1 TL2-COPDAC-28 + pelvic RT n=1 TL3-DECOPDAC-21

Supplementary Figure S1. Boys who delivered semen at diagnosis and 2 years post-diagnosis, a comparison of sperm concentration over time in 28 patients treated for childhood Hodgkin lymphoma. TL, treatment level; RT, radiotherapy. Applied references values for semen analysis are according to WHO criteria (Cooper et al., 2010). Normospermia refers to ≥15 mil sperm count; oligospermia 5–15 mil/ml, severe oligospermia 0–5 mil/ml, and azoospermia 0 sperm cells. Three patients marked with an asterisk (*) received pelvic radiotherapy as part of their cHL treatment. None of the boys were irradiated in the inguinal or testicular area, expected radiation directed towards the testes was <0.5–1 Gy. Figure generated via https://sankeymatic.com/.